

2025 GRADUATE LUNCHEON

Monday, May 19, 2025 11:30am - 1pm VIP Reception 1pm-2pm
The Hall on Dragon - Design District

TITLE SPONSOR (1) \$25,000

- VIP table (10) – Premium Seating
- VIP Valet Service
- 10 tickets to the VIP Reception
- 2-minute speaking opportunity at the event
- Logo/Company name on Invitation*
- 1 full-page advertisement in the event program**
- Recognition in all media and promotional materials
- PLUS all benefits of being a VIP Reception Sponsor

VALET SPONSOR (1) \$15,000

- VIP table (10) – Premium Seating
- VIP Valet Service
- 5 tickets to the VIP Reception
- Signage at Valet Area & promotional gift item in cars
- 1-minute video during the event
- Logo/Company name on Invitation*
- Half-page advertisement in the event program**
- Recognition in all media and promotional materials

RAFFLE SPONSOR (1) \$10,000

- VIP table (10) – Premium Seating
- VIP Valet Service
- 2 tickets to VIP Reception
- Premier Signage in Raffle Area
- Logo/Company Name in all raffle promotions
- Logo/Company Name on Invitation*
- 1-minute video during the event
- Half-page advertisement in the event program**
- Recognition in all media and promotional materials

VIP RECEPTION SPONSOR (3) \$7,500

- VIP table (10) – Premium Seating
- VIP Valet Service
- 10 tickets to VIP Reception
- Speaking opportunity at the VIP Reception
- Logo/Company Name at the VIP Reception
- Recognition in all printed materials & event slideshow

EMPOWER SPONSOR \$5,500

- Table for 10 guests
- 1-minute video during the event
- Complimentary Valet Parking
- Half-page advertisement in the event program**
- Recognition in all printed materials & event slideshow

- TITLE SPONSOR-\$25,000
- VALET SPONSOR- \$15,000
- RAFFLE SPONSOR-\$10,000
- VIP RECEPTION SPONSOR- \$7,500
- EMPOWER SPONSOR- \$5,500

Name _____

Address _____

City _____ State _____

Zip Code _____

Phone _____

Email _____

Name to appear in event materials and program:

Do not wish to be listed on printed materials.

BILLING INFORMATION

Charge \$ _____ to my credit card.

CC Number _____

Expiration Date ____ / ____ Security Code _____

Billing Address _____

Signature _____

Mail Checks to: ScholarShot, Inc.,
2904 Swiss Ave. Dallas, TX 75204

For additional information please contact:
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